



DATE: _____

TO HARNETT COUNTY BOARD OF ELECTIONS

THE FOLLOWING PERSON IS NOW **DECEASED**. PLEASE DELETE HIM/HER FROM THE VOTERS REGISTRATION LIST.

NAME OF DECEASED: _____

ADDRESS: _____

DATE OF BIRTH: _____ **GENDER:** _____

SIGNATURE OF PERSON MAKING REQUEST:

ADDRESS: _____

RELATIONSHIP: CIRCLE ONE

- | | | | |
|------------|---------|-------------|--------|
| WIFE | HUSBAND | DAUGHTER | SON |
| BROTHER | SISTER | FATHER | MOTHER |
| GRANDCHILD | | GRANDPARENT | |